



## WYOMING DEPARTMENT OF HEALTH, AGING, CLS

### Nutrient Analysis Menu Approval Sheet

(This form will not be accepted without check marks based on meals/day and signature)  
(Average amounts per meal over one month)

<b>Nutrient</b>	<b>1 meal/day</b>		<b>2 meals/day</b>		<b>3 meals/day</b>	
	<i>Minimum</i>	<i>Check</i>	<i>Minimum</i>	<i>Check</i>	<i>Minimum</i>	<i>Check</i>
<i>Energy</i>	660 calories <i>No less than 600 calories per day</i>		1,320 calories <i>No less than 1,200 calories per day</i>		2,000 calories <i>No less than 1,800 calories per day</i>	
<i>Protein</i>	30 grams		55 grams		75 grams	
<i>Fat</i>	30% <i>35% or less per meal</i>		30% <i>35% or less per meal</i>		30% <i>35% or less per meal</i>	
	<10% saturated fat		<10% saturated fat		<10% saturated fat	
	Avoid trans fat		Avoid trans fat		Avoid trans fat	
<i>Fiber</i>	9 grams		18 grams		28 grams	
<i>Calcium</i>	330mg		660mg		1,000mg	
<i>Vitamin A</i>	300mcg		600mcg		900mcg	
<i>Vitamin B6</i>	0.6mg		1.2mg		1.7mg	
<i>Vitamin B12</i>	.8mcg		1.6mcg		2.4mcg	
<i>Vitamin C</i>	30mg		50mg		75mg	
<i>Vitamin D</i>	3ug		6ug		10ug	
<i>Potassium</i>	1,567mg		3,133mg		4,700mg	
<b><i>Maximum amounts per meal average over one month</i></b>						
<i>Sodium</i>	1,400mg		1,800mg		2,300mg	
<i>Added sugars</i>	<17g		<34g		<51g	

I certify that I have reviewed the Title III-C menu policy and the menu herein meets all nutritional requirements as indicated on this table and within the menu policy specifications. *Please check appropriate boxes to indicate standards are met for one, two, or three meals per day.*

*Menu Dates Approved:* \_\_\_\_\_

*Registered Dietitian Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_